

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000082105

FILED
Oct 01, 2011
Secretary of State

Entity Name: VISUAL HEALTH & LEARNING CENTER, INC.

Current Principal Place of Business:

815 WOODBURY ROAD
SUITE 101
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

10344 FALCON PARC BLVD.
SUITE 103
ORLANDO, FL 32832

New Mailing Address:

2942 WILD TAMARIND BLVD
ORLANDO, FL 32828

FEI Number: 20-5083706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS-MCDERMED, JENNA E
10344 FALCON PARC BLVD.
SUITE 103
ORLANDO, FL 32832 US

Name and Address of New Registered Agent:

WILLIAMS-MCDERMED, JENNA E
2942 WILD TAMARIND BLVD
ORLANDO, FL 32828 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JENNA MCDERMED

10/01/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: WILLIAMS-MCDERMED, JENNIFER E
Address: 2942 WILD TAMARIND BLVD
City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER MCDERMED

PRES

10/01/2011

Electronic Signature of Signing Officer or Director

Date